

AM

EXECUTIVE LOBBYING EXPENDITURE REPORT

FORM 507

- COVERING JANUARY 1 - JUNE 30, _____ - DUE AUGUST 15
 COVERING JANUARY 1 - DECEMBER 31, 2007 - DUE FEBRUARY 15

Mail to: the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808

OR

Fax to: (225)763-6787 or (225)763-6790

Amended

FOR OFFICE USE ONLY
 Postmark Date: 9-25-07
 era (8107)

3061763

1. Name Knight Shaeen J.
 Last First MI

2. Business Address: 6767 Perkins Rd, Ste 100, Baton Rouge, LA 70808
 Street and No. 6767 City Baton Rouge State LA Zip 70808

Mailing Address Same

3. Business Phone 225.763.8500
 Area Code and Telephone Number

4. Total of all executive lobbying expenditures made January 1 through June 30: \$ 114.66
 (Include expenditures from Schedules A and B)
5. Total of all executive lobbying expenditures made July 1 through December 31: \$ 0.00
 (When Applicable) (Include expenditures from Schedules A and B)
6. Total of all executive lobbying expenditures made during calendar year:
 (Line 4 added to Line 5 should equal Line 6) \$ 114.66

7. Did you make an expenditure exceeding \$50 on one occasion for an executive branch official:

From January 1 through June 30?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>
From July 1 through December 31?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	NA <input type="checkbox"/>

If the answer to either question in Number 7 above is YES, complete Schedule A and attach.

8. Did you make expenditures exceeding the sum of \$250 for an executive branch official:

From January 1 through June 30?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	NA <input type="checkbox"/>
From July 1 through December 31?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	NA <input type="checkbox"/>

If the answer to either question in Number 8 above is YES, complete Schedule A and attach.

9. Did you expend funds for any reception, social gathering, or other function to which more than twenty-five executive branch officials were invited during this reporting period?

Yes No

If the answer to Number 9 above is YES, complete Schedule B and attach.

EXECUTIVE LOBBYING EXPENDITURE REPORT



10. PROVIDE BELOW (a) the name of the executive branch department as listed in the executive branch schedule; (b) the aggregate total of all expenditures attributable to the department made during the January 1 - June 30 reporting period; (c) the aggregate total of all expenditures attributable to the department made during the July 1 - December 31 reporting period when applicable; (d) the aggregate total of all expenditures made in a calendar year attributable to the department.

- 1) a. Name of Department: TASURANCE
- b. Total of all expenditures made January 1 through June 30: \$ 114.66
- c. Total of all expenditures made July 1 through December 31: \$ 0.00
(When applicable)
- d. Total of all expenditures made during the calendar year: \$ 114.66

- 2) a. Name of Department: _____
- b. Total of all expenditures made January 1 through June 30: \$ _____
- c. Total of all expenditures made July 1 through December 31: \$ _____
(When applicable)
- d. Total of all expenditures made during the calendar year: \$ _____

- 3) a. Name of Department: _____
- b. Total of all expenditures made January 1 through June 30: \$ _____
- c. Total of all expenditures made July 1 through December 31: \$ _____
(When applicable)
- d. Total of all expenditures made during the calendar year: \$ _____

11. PROVIDE BELOW (a) the name of the executive branch department and the individual agency as listed in the executive branch schedule; (b) the aggregate total of all expenditures attributable to the agency made during the January 1 - June 30 reporting period; (c) the aggregate total of all expenditures attributable to the agency made during the July 1 - December 31 reporting period when applicable; (d) the aggregate total of all expenditures made in a calendar year attributable to the agency.

- 1) a. Name of Department and Individual Agency: Treasurer, Office of Health Insurance
- b. Total of all expenditures made January 1 through June 30: \$ 114.66
- c. Total of all expenditures made July 1 through December 31: \$ 0.00
(When applicable)
- d. Total of all expenditures made during the calendar year: \$ 114.66

- 2) a. Name of Department and Individual Agency: _____
- b. Total of all expenditures made January 1 through June 30: \$ _____
- c. Total of all expenditures made July 1 through December 31: \$ _____
(When applicable)
- d. Total of all expenditures made during the calendar year: \$ _____
- 3) a. Name of Department and Individual Agency: _____
- b. Total of all expenditures made January 1 through June 30: \$ _____
- c. Total of all expenditures made July 1 through December 31: \$ _____
(When applicable)
- d. Total of all expenditures made during the calendar year: \$ _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.



Signature of Lobbyist

Executive Lobbyist Registration No. 29